

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM		Application Number		10/522,043-Conf. #6728	
		Filing Date		October 13, 2005	
		First Named Inventor		Xin Lu	
		Title	Polypeptide		
		Art Unit	1642		
		Examiner Name		Sean E. Aeder	
		Attorney Docket No.		31265/5829	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 04743

OR

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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Address

City	State	Zip	
Country	Telephone	Email	

I am the:

☐ Applicant/Inventor.

☒ Assignee of record. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record			
Signature	<i>Edward A. McDermott, Jr.</i>		
Name	Edward A. McDermott, Jr.		
Title and Company	President, Ludwig Institute for Cancer Research		
Date	May 23, 2008		
Telephone	212-450-1550		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.